



Bronllys Hospital, Bronllys, Brecon, Powys, LD3 0LU

This patient group direction (PGD) must only be used by registered health professionals who have been named and authorised by their organisation to practice under it. The most recent and in date final signed version of the PGD should be used. Health professionals should always access the PGD via the PTHB intranet to ensure that they are always working to the most up to date version

**Patient Group Direction**  
for the administration of

**Proxymetacaine Hydrochloride 0.5% w/v Eye Drops (minims)**

by registered nurses  
in Powys Teaching Health Board Minor Injury Unit or Outpatient departments

Version number: PGD 0195

Bwrdd Iechyd Addysgu Powys yw enw gweithredol Bwrdd Iechyd Lleol Addysgu Powys Powys Teaching Health Board is the operational name of Powys Teaching Health Board

## Change history

| <b>Version number</b> | <b>Change details</b> | <b>Date</b> |
|-----------------------|-----------------------|-------------|
| PGD                   | Initial issue         | 02/12/2022  |

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**PGD authorisation**

| <b>Name</b>   | <b>Job title and organisation</b>  | <b>Signature</b>  | <b>Date</b> |
|---|--|---|-------------|
| <b>Senior Doctor<br/>Dr Kate Wright</b>   | Lead Doctor for PTHB   | DocuSigned by:<br><i>Kate Wright</i><br>1F267952823F473...    | 12/9/2022   |
| <b>Chief Pharmacist<br/>Jacqui Seaton</b>   | Chief Pharmacist for PTHB  | DocuSigned by:<br><i>Jacqui Seaton</i><br>71E8089DE3634C4...  | 12/2/2022   |
| <b>Clinical Governance<br/>Lead<br/>Amanda Edwards</b>  | Clinical Governance Lead<br>for PTHB-<br>Assistant Director for<br>Innovation and<br>Improvement | DocuSigned by:<br><i>Amanda Edwards</i><br>74A4E51A42E9473... | 12/12/2022  |
| <b>Senior<br/>Representative of<br/>Professional Group<br/>using the PGD<br/>Claire Roche</b> | Executive Director of<br>Nursing and Midwifery for<br>PTHB                                       | DocuSigned by:<br><i>claire roche</i><br>FC9C4C63FC374A7...   | 12/5/2022   |

[Appendix A](#) provides a staff accreditation sheet. Individual practitioners must be authorised by name to work to this PGD.

Reference Number: PGD 0195

Valid from: 02/12/2022

Review date: 02/06/2025

Expiry date: 02/12/2025

|  | <b>Requirements of registered health professionals working under the PGD</b>   |
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| <b>Training and competency of registered health professionals<br/>Qualifications and professional registration</b> | <p>Practitioners must only work under this PGD where they are competent to do so. Practitioners working under this PGD must also be a registered professional with the following body:</p> <ul style="list-style-type: none"> <li>nurses currently registered with the Nursing and Midwifery Council (NMC)</li> </ul> <p>All registered health professionals should have a current contract of employment with Powys Teaching Health Board. The practitioners must also fulfil the training and additional requirements detailed below.</p> <p>Check <a href="#">Appendix A</a>: Staff accredited to use the Patient Group Direction</p>   |
| <b>Initial training</b>  | <ul style="list-style-type: none"> <li>The administration of Proxymetacaine Hydrochloride 0.5% w/v eye drops (minims) and knowledge of its uses, contraindications and adverse effects.</li> <li>The management and reporting of adverse drug reactions.</li> </ul> <p>Additionally practitioners:</p> <ul style="list-style-type: none"> <li>must be authorised by name as an approved practitioner under the current terms of this Patient Group Direction before working to it</li> <li>must have undertaken appropriate training for working under PGDs for supply/administration of medicines</li> <li>must be competent in the use of PGDs (see <a href="#">NICE Competency framework</a> for health professionals using patient group directions)</li> <li>must have completed Patient Group Directions training available via <a href="#">ESR</a></li> <li>must be familiar with the product(s) and alert to changes in the <a href="#">BNF/ Summary of Product Characteristics</a></li> <li>must have undertaken training appropriate to this PGD as required by local policy.</li> <li>must be competent in the recognition and management of recognised adverse reactions, including anaphylaxis. Must be competent in the administration of adrenaline and have up to date Life Support skills (Basic Life Support Skills are PTHB standard; Intermediate Life Support Skills for MIU)</li> <li>must have access to the Patient Group Direction and associated online resources</li> </ul> |

Reference Number: PGD 0195

Valid from: 02/12/2022

Review date: 02/06/2025

Expiry date: 02/12/2025

|  |   |
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|  | <ul style="list-style-type: none"> <li>• Should fulfil any additional requirements defined by local policy</li> <li>• Must have undertaken and completed at least level 3 Safeguarding of Children, Young people and Vulnerable adults – Training and Competency passport, as applicable to the role</li> </ul> <p><b>THE PRACTITIONER MUST BE AUTHORISED BY NAME, UNDER THE CURRENT VERSION OF THIS PGD BEFORE WORKING ACCORDING TO IT.</b></p>  |
| <b>Competency assessment</b>                                     | <p>Evidence of ongoing / refresher PGD training to be submitted to Line Manager annually.</p> <p>Practitioners must be competent, recognise their own limitations and personal accountability and act accordingly.</p> <p>Practitioners must make a self-declaration of competency on PADR.</p>   |
| <b>Ongoing training and competency</b>                           | <p>Updating at least every 2 years on the use of PGDs and Proxymetacaine Hydrochloride 0.5% w/v eye drops (Minims).</p> <p>Practitioners must ensure they are up to date with relevant issues and clinical skills and management of anaphylaxis, Life support Skills (as applicable to the role), with evidence of appropriate Continued Professional Development (CPD). Compliance with all mandatory NHS training.</p> <p><b>It is the responsibility of the healthcare professional to maintain their own competency to practice within this PGD.</b></p>                  |
| <b>Clinical condition or situation to which this PGD applies</b> |   |
| <b>Clinical condition or situation to which this PGD applies</b> | <p>Local anaesthetic to enable eye examination and treatment:</p> <ul style="list-style-type: none"> <li>• To facilitate eye examination</li> <li>• To remove non-penetrating corneal foreign bodies</li> <li>• To facilitate eye irrigation</li> <li>• Intraocular pressure measurement</li> </ul> <p><b>It is the responsibility of the administering nurse to ensure that the patient is within the inclusion criteria, and that there are no reasons for exclusion before proceeding with the treatment. If there is any reason for concern, seek medical advice.</b></p> |

Reference Number: PGD 0195

Valid from: 02/12/2022

Review date: 02/06/2025

Expiry date: 02/12/2025

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| <p><b>Inclusion criteria</b></p>  | <ul style="list-style-type: none"> <li>• If treated in MIU, patients are aged 2 years or over</li> <li>• If treated in outpatients, patients are aged 6 months or over</li> <li>• Meets the clinical situations criteria</li> <li>• Medical and drug history taken, no reason for exclusion</li> <li>• Informed consent - Refer to <a href="#">PTHB Consent to Treatment and Examination Policy</a></li> </ul> <p>Any vulnerable adult or child protection concerns should be referred to Safeguarding and <a href="#">PTHB safeguarding policies</a> followed. Where there are safeguarding concerns (Child Protection or Protection of Vulnerable Adults, POVA) advice from the local Safeguarding team should be sought (<a href="#">see below</a>).</p>  |
| <p><b>Exclusion criteria</b><br/>(Exclusion under this Patient Group Direction does not necessarily mean the medication is contraindicated, but it would be outside its remit and another form of authorisation will be required)</p> | <ul style="list-style-type: none"> <li>• Conditions outside of the clinical situations criteria</li> <li>• Patient or representative refuses treatment. Individuals for whom valid consent, or 'best-interests' decision (when a person lacks capacity), in accordance with the <a href="#">Mental Capacity Act 2005</a>, has not been obtained or received. Refer to sections "<a href="#">action to be taken if the patient is excluded</a>" and "<a href="#">action to be taken if the patient or carer declines treatment</a>".</li> <li>• Child under 2 years of age if treated in MIU or under 6 months of age if treated in outpatients</li> <li>• Known hypersensitivity to Proxymetacaine Hydrochloride and / or any component of the eye drops</li> <li>• Contact lenses in situ</li> <li>• Known hypersensitivity to other ester type local anaesthetics</li> <li>• Avoid in preterm neonates</li> <li>• An indication for immediate referral to an ophthalmologist or ophthalmology outpatient department, as listed in <a href="#">Powys Minor Injury Guidelines</a></li> </ul> |
|   | <ul style="list-style-type: none"> <li>• This product is not intended for long term use</li> <li>• Protection of the eye from rubbing, irritating chemicals and foreign bodies during the period of anaesthesia is very important. Patients should be advised to avoid touching the eye until the anaesthesia has worn off</li> <li>• This product should be used cautiously and sparingly in patients with known allergies, cardiac disease or hyperthyroidism because of the increased risk of sensitivity reactions</li> <li>• Minims Proxymetacaine hydrochloride should not be mixed with fluorescein, however, fluorescein can be added to the eye after it has been anaesthetised with Minims Proxymetacaine hydrochloride</li> </ul>   |

Reference Number: PGD 0195

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Review date: 02/06/2025

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**Cautions / reasons for seeking further advice from a prescriber**

- Use with caution in an inflamed eye as hyperaemia greatly increases the rates of systemic absorption through the conjunctiva

Patients with complex multiple pathologies, polypharmacy or multiple allergies.

Check for any other medications that the patient is taking, including topical or inhaled products, food supplements and herbal or homeopathic products.

(Refer to [BNF/SPC](#) for full list)

- Pregnant or breastfeeding patients (safety has not been established so use only when considered essential by the physician): Call medical cover for advice and document advice given. Toxbase UTIS contains the following advice for Local anaesthetic eye drops in pregnancy: No human pregnancy data were located for oxybuprocaine or proxymetacaine, and no reports of malformation or adverse pregnancy outcomes after ophthalmic administration of lidocaine or tetracaine were found. One study of 23 pregnancies found no association between use of tetracaine in the first four months of gestation and infant malformation; however, the available data are insufficient to state that there is no increased risk. Lidocaine has been used for a number of years without apparent ill consequence. Although data are limited, use of topical local anaesthetics may be appropriate if clinically indicated.

Under Section 128 and 130 of the Social Services and Wellbeing (Wales) Act 2014, staff have a duty to inform the Local Authority if they have reasonable cause to suspect that an adult or child is at risk. Any vulnerable adult or child protection concerns should be referred to Safeguarding and the Minor Injury Unit guidelines followed, along with [PTHB safeguarding policies](#). Consider discussing with GP.

Any safeguarding concerns need to be directed to Safeguarding Hub:

- To generic email address:

[PowysTHB.Safeguarding@wales.nhs.uk](mailto:PowysTHB.Safeguarding@wales.nhs.uk)

And

- Central Safeguarding number: 01686 252806
- Out of hours: 08457 573818

Reference Number: PGD 0195

Valid from: 02/12/2022

Review date: 02/06/2025

Expiry date: 02/12/2025

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|  | <p>Advice can also be sought from local Safeguarding leads:</p> <ul style="list-style-type: none"><li>• CNS for Safeguarding North Powys Office: 01874 442082; mobile: 07964 132698</li></ul> <p>Or</p> <ul style="list-style-type: none"><li>• CNS for Safeguarding South Powys Office: 01874 442098; mobile 07973 686520</li></ul> |
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Reference Number: PGD 0195

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Expiry date: 02/12/2025

|   |  |
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| <b>Arrangements for referral for medical advice</b>     | Contact GP/ Optician for advice or refer to DGH/Optician/GP if applicable. Document advice given.  |
| <b>Action to be taken if patient excluded</b>           | Explain reason to patient / carer.<br>Record reason for exclusion and any action taken.<br>If appropriate refer to GP/ Optician / DGH /OOH, offer alternative management if appropriate.   |
| <b>Action to be taken if patient declines treatment</b> | The patient information leaflet should be available to inform consent.<br><br>Explain consequences of refusing treatment.<br><br>Make patient or their representative aware of alternative sources of treatment (DGH, Optician or GP as appropriate). Offer alternative management if appropriate.<br>Document refusal and any advice given. Complete a Discharge Against Advice Form if appropriate.<br>Inform or refer to GP/Optician/follow local procedures as appropriate.<br>Complete the letter on the WPAS system and inform GP. |
| <b>Details of the medicine</b>                          |  |
| <b>Name, form and strength of medicine</b>              | Minims Proxymetacaine hydrochloride 0.5% w/v, Eye Drops, solution.<br>Single use eye drops solution  |
| <b>Legal category</b>                                   | POM  |
| <b>Off-label use</b>                                    | N/A  |
| <b>Route/method of administration</b>                   | Eye drops  |
| <b>Dose and frequency</b>                               | Apply <b>ONE</b> drop to into the conjunctival sac.<br>A second drop may be applied if necessary.<br><br>To achieve deep anaesthesia, one drop may be instilled every 5 – 10 minutes for up to 7 applications.   |
| <b>Quantity to be administered</b>                      | Single application of one or two drops initially.<br><br>To achieve deep anaesthesia, one drop may be instilled every 5 – 10 minutes for up to 7 applications.   |

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|  |   |
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| <b>Maximum or minimum treatment period</b>                         | A maximum of one minim for one episode of care. Use the lowest dose to produce the required effect. Discard the remainder of the unit dose.   |
| <b>Storage</b>   | <p>Minims Proxymetacaine hydrochloride 0.5% w/v, Eye Drops, solution are supplied in single use containers. Do not use if the solution is more than pale yellow in colour.</p> <p>Once opened, use immediately. Each minims unit should be discarded after a single use.</p> <p>Store at 2-8°C. Do not freeze. Keep container in the outer carton.</p> <p>If necessary, the product may be stored at temperatures not exceeding 25°C for up to 1 month only. If the product is to be stored unrefrigerated at temperatures not exceeding 25°C, the adhesive label provided in the carton should be completed (to state 1 month from removal from the fridge) and affixed over the bar code.</p> |
| <b>Drug interactions</b>   | <p>A detailed list of drug interactions is available in the SPC, which is available from the electronic Medicines Compendium website: <a href="http://www.medicines.org.uk">www.medicines.org.uk</a>.</p> <p>Refer to <a href="#">BNF</a>.</p> <p>A period of at least one minute should be allowed after administration of Minims Proxymetacaine hydrochloride 0.5%, before subsequent administration of other topical eye preparations.</p>   |
| <b>Identification, management and reporting of adverse effects</b> | <p>May cause transient blurring of vision on instillation. Pupillary dilatation or cycloplegic effects have rarely been observed with Proxymetacaine hydrochloride preparations.</p> <p>Irritation of the conjunctiva or other toxic reactions have occurred only rarely.</p> <p>A severe, immediate-type apparently hyperallergic corneal reaction may rarely occur. This includes acute, intense and diffuse epithelial keratitis; a grey ground-glass appearance; sloughing of large areas of necrotic epithelium; corneal filaments and sometimes, iritis with descemetitis.</p>  |

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|  | <p>Prolonged application of anaesthetic eye drops may cause corneal damage.</p> <p>Transient loss of lens movement (inability to read).</p> <p>This list is not exhaustive. Refer to <a href="#">BNF</a> or <a href="#">SPC</a> for complete list.</p> <p>Report any suspected adverse reactions to a doctor, document in the patients record and inform their GP.</p> <p>Healthcare professionals and individuals/parents/carers are encouraged to report suspected adverse reactions to the Medicines and Healthcare products Regulatory Agency (MHRA) using the Yellow Card reporting scheme at: <a href="http://yellowcard.mhra.gov.uk">http://yellowcard.mhra.gov.uk</a> or search for MHRA Yellow Card in the Google Play or Apple App Store. For established medicines, serious adverse events in adults or all suspected adverse reactions in children that may be attributable to the medication should be reported. Guidance on the yellow card system is available at the back of the BNF, or using the above link.</p> <p>Anaphylaxis and resuscitation equipment including adrenaline (1 in 1000) injection and a working telephone must be available for immediate use.</p> <p>In case of anaphylaxis:-</p> <ul style="list-style-type: none"><li>• Refer to adrenaline (epinephrine) <a href="#">PGD</a> and anaphylaxis policy</li><li>• Request medical assistance urgently. If the GP is not immediately available dial 999 to transfer to A&amp;E</li><li>• Ensure reaction is fully documented in patient notes</li><li>• Ensure all patient records are marked <b>ALLERGIC TO PROXYMETACAINE HYDROCHLORIDE.</b></li><li>• The patient may be advised to wear a MedicAlert or similar device to alert other healthcare providers</li></ul> <p>All significant adverse drug reactions must be recorded via the <a href="#">Once for Wales Reporting System</a></p> |
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| <p><b>Records to be kept</b></p> | <p>Record consultation details as required by local procedures. In addition, record:</p> <ul style="list-style-type: none"> <li>• Name, address and DOB of patient</li> <li>• Name and address of GP</li> <li>• Medical and drug history taken, including any allergies and previous adverse events</li> <li>• Any reasons for exclusion or referral, including actions taken</li> <li>• Any advice received from medical cover and advice given to patient / carer</li> <li>• If the patient has refused treatment, and any advice given in this circumstance</li> <li>• That valid informed patient consent to treatment was obtained (record name of representative who gave consent if appropriate), or a decision to treat made in the individual's best interests in accordance with the <a href="#">Mental Capacity Act 2005</a>.</li> <li>• That the drug is being administered in accordance with a PGD, record PGD title, number and version.</li> <li>• Record any advice given</li> <li>• Date and time of administration</li> <li>• Name, form, strength and dose of drug administered</li> <li>• Expiry date</li> <li>• Route of administration – including which eye(s)</li> <li>• Details of any adverse reactions and actions taken</li> </ul> <p>The record must include the printed name and signature of the nurse responsible for administration. All records should be clear, legible and contemporaneous.</p> <p>A record of all individuals receiving treatment under this PGD should be kept for audit purposes in accordance with local policy.</p> <p>The responsible physician/GP should be informed of the treatment provided, via a discharge summary of care.</p> |
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| <b>Patient information</b>  |   |
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| <b>Written/verbal information to be given to patient or carer</b> | <ul style="list-style-type: none"> <li>• Provide patient information leaflet.</li> <li>• Explain contraindications and cautions as documented in the patient information leaflet plus expected benefit/duration of effect.</li> <li>• The eye drops may cause a transient blurring of vision on instillation. Warn patient not to drive or operate machinery until the vision is clear.</li> <li>• The eye will remain numb for about one hour, depending on how many drops were instilled.</li> <li>• After use protect the eye from dust and bacterial contamination. Consider using an eye pad for 3 to 4 hours after administration. Do not drive or operate machinery with eye pad in place.</li> <li>• Do not smoke with an eye pad in situ.</li> <li>• Do not wear contact lenses until the effects of the drops have completely worn off. Contact lens wearers who have experienced eye trauma may need a longer period without contact lenses – seek advice from ophthalmologist or optician.</li> <li>• Avoid touching the eye until the anaesthetic has worn off.</li> </ul> |
| <b>Follow-up advice to be given to patient or carer</b>           | <p>Inform individual of possible side effects and their management.</p> <p>Advise them to seek medical advice immediately if they have any signs of infection, unexpected reaction or other cause for concern. Contact 999, GP via surgery or 111 service or Optician if appropriate. For patients treated in MIU, follow up according to Powys Minor Injury Guidelines, and advise patients to see their optician if they experience any problems.</p>   |

## Key references

[BNF](#) accessed 08/11/2022

[SPC](#)- Minims Proxymetacaine hydrochloride 0.5% w/v, Eye Drops, solution, Bausch & Lomb U.K Limited, last updated 9/3/2016

[Patient information leaflet](#), Bausch & Lomb UK, Ltd. March 2019.

[NICE CKS Corneal Superficial injury](#). Revised June 2022.

Toxbase UTIS, [www.toxbase.org](http://www.toxbase.org). accessed 29/11/2022.

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